

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|----------------|-------------------|
| FEE DETERMINATION | <i>AS</i> | <i>0910500</i> | |
| O.I.P.E. CLASSIFIER | <i>AS</i> | <i>4/11</i> | |
| FORMALITY REVIEW | <i>AS</i> | <i>6-8-94</i> | |
| RESPONSE FORMALITY REVIEW | <i>LA</i> | <i>60312</i> | <i>6-8-94/950</i> |

INDEX OF CLAIMS

| | | | |
|---|-------------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral)... Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Date |
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| 1 | 9/3/93 |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here